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(BERC)

SUPPLEMENT 1 TO ATTACHMENT 3.1-A

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|        | STATE PLAN                                      | UNDER TITLE XIX (  | OF THE SOCIAL SECU                      | RITY ACT   |
|--------|---|--------------------|---|--|
|        | State/Territ                                    | ory: _ ILLINOIS    |   |  |
|        |   | CASE MANAGEME      | NT SERVICES                             |  |
| A. Tar | get Group: N                                    | OT APPLICABLE      |   | OFFICIAL   |
| B. Are | as of State in whi                              | ch services will   | be provided:                            |  |
|        | Entire State.                                   |                    |   |  |
|        |   |                    | reas (authority of<br>ervices less than | section 1915(g)(1)<br>Statewide:                       |
| C. Com | parability of Serv<br>Services are prov<br>Act. |                    | e with section 190                      | 2(a)(10)(B) of the                                     |
|        | of section 1915(g                               | )(1) of the Act is |   | scope. Authority<br>de services without<br>of the Act. |
| D. Def | inition of Service                              | s:                 |   |  |
| B. Qua | lification of Prov                              | iders:             |   |  |

| TN  | No.  | <u>87-16</u> |
|-----|------|--------------|
| Suj | erse | edes         |
| TV  | Mo   |              |

Approval Date 8/28/87 Effective Date 4-21-87

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ILLINOIS State/Territory:

F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

- 1. Eligible recipients will have free choice of the providers of case management services.
- 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

OFFICIAL

TN No.

Supersedes

TN No.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

| State/Territory_ | ILLINOIS |
|------------------|----------|
|------------------|----------|

## CASE MANAGEMENT SERVICES

- A. Target Group C: Individuals aged birth to 36 months who are determined eligible and receiving early intervention services and who require assistance in gaining access to early intervention services as identified in the Individualized Family Service Plan (IFSP).
- B. Areas of State in which services will be provided:
  - X Entire State
- C. Comparability of Services:

Services are provided in accordance with section 1902(a)(10)(B) of the Act.

- X Services are not comparable in amount, duration and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.
- D. Definition of Services:
- =10/94 Case management services include services to coordinate the Individualized Family Service Plan provided by qualified staff whose services are needed by the target population to identify the medical, social, educational and other special needs of the client; identify the services necessary to meet those needs; and facilitate access to those services. Case management services shall not duplicate other case management provided through the Medical Assistance program.
- E. Oualification of Providers:
- all individuals employed or contracted by early intervention programs/providers, or individuals maintaining a private practice in their area of specialty, must meet minimum entry level degree and licensing or other credentialing requirement for their respective disciplines or positions pursuant to state regulations, as well as the requirements for the Early Intervention Specialist as set forth by the Illinois Interagency Council on Early Intervention. Credentialing is accomplished through submission of an individual portfolio to the designated State agency(ies) with annual updates as required or through the completion of an approved university program of study. Case managers must have at least a bachelor's degree or be under the supervision of a person with a bachelor's or master's degree.

TN No. 94-27 Supersedes TN No. 93-31 Approval Date MAR 2 1 1995

Effective Date 10-01-94

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|-----------------|----------|----------|------------|-------|--|
| State/Territory | ILLINOIS | <u>;</u> | b (        | <br>1 |  |

F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

TN No. 93-31 Supersedes TN No. \_\_\_\_ Approval Date 1-26-94

Effective Date 10-1-93